Verification of Tribal Trust Land Ownership/Income

TO:					
DATE:					
RE:	Verification of ownership of Individual Trust land and income derived from land				
Applicant/Re					
	$A_{]}$	pplicant/Tenan	t Name		Date of Birth
verification of	of income.	The information	on provided wi		ing program that requires atial to satisfaction of that atted.
We have attach	ched a copy	of a release of	information for	rm to allow us to o	btain this information.
Please return	to:				
	Manage	ement Agent			
		_	•	cial representativo ibal Designated O	· · · · · · · · · · · · · · · · · · ·
thePlease acknown	wledge that	re	eservation. held in Trust b	-	ual trust land located on Government for this
	ledge the inc	lividual 🗌 doe		me from this the lea	asing of this land for in the
To our knowl	ledge the inc	lividual 🗌 DC	DES NOT recei	ve any income from	n this land.
Signed by				Title	Date Signed
Mailing Add	ress	City	State	Zip Code	
Telephone #		Fax #	e-mail ad	dress	